



Girl Scouts®

# Program Event Registration

**Instructions**

1. Use this form to register Girl Scout troops/groups or individual girls for any council sponsored program activity. Use one form for each event. You may copy this form as needed. Honor the published registration information and dates for each activity.
2. Registrations will be accepted in order of postmark or receipt at the Girl Scout Service Center. The deadline is three weeks prior to event or when event is filled, unless specified otherwise.
3. Expect a confirmation packet with additional information no less than two weeks prior to event.
4. No refund will be given when any reservation is cancelled with less than two weeks notice. If the reservation is cancelled with more than two weeks notice, then a refund will be issued.

Event Name (If Horselover Weekend, complete other side of this form) \_\_\_\_\_

Event Date \_\_\_\_\_ Location of Event \_\_\_\_\_

Person Coordinating this Registration \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Check One:  Registering as Troop # \_\_\_\_\_

Registering as \_\_\_\_\_ individual girls, (planning to attend without leader/co-leader). **Please list names of individual participants in space shown below.** STUDIO 2B

Number of Girls by Age Level: \_\_\_\_\_ Da. \_\_\_\_\_ Br. \_\_\_\_\_ Jr. \_\_\_\_\_ Cad. \_\_\_\_\_ Sr.

Would any of the adults be interested in helping with the event planning or sharing skills at the event? (Please include names and phone numbers.)

	Total	Ethnic/Racial Information							Any Disabilities
		W-White		AI-American Indian		H-Hispanic			
		B-Black	A-Asian or Pacific Islander	Alaskan Native	O-Other	M-Multi-racial			
		W	B	A	AI	H	O	M	
Girl Participants									
Girl Program Aides									
Adults									
Total Attendance									

**For Horselover Weekends**

Number of girls riding \_\_\_\_\_

List dates in order of preference  
1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

Choice of riding time (mark 1<sup>st</sup>, 2<sup>nd</sup>, & 3<sup>rd</sup>)

Saturday a.m. \_\_\_\_\_ Saturday p.m. \_\_\_\_\_

Sunday a.m. \_\_\_\_\_ Sunday p.m. \_\_\_\_\_

Is your troop interested in just camping if riding spaces are already taken?

Yes  No

We welcome Girl Scouts with special needs. Please list their names and any special needs or restrictions we will need to accommodate: \_\_\_\_\_

Total Number of Girls \_\_\_\_\_ X \_\_\_\_\_ (fee) = \$ \_\_\_\_\_ Total

Total Number of Adults \_\_\_\_\_ X \_\_\_\_\_ (fee) = \$ \_\_\_\_\_ Total

Other Fees \_\_\_\_\_ \$ \_\_\_\_\_ Total

Total Cost = \$ \_\_\_\_\_

**Credit Card Payments**

\_\_\_\_\_ Visa \_\_\_\_\_ MC

Account No. \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

**For Office Use Only: Route to Program Secretary**

Date Received \_\_\_\_\_ Amount Received \_\_\_\_\_

Receipt No. \_\_\_\_\_ Acct. No. \_\_\_\_\_ Date Cancelled \_\_\_\_\_

Mailing Address: P. O. Box 240246, Memphis, TN 38124-0246

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